

# LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.  
Registrations expire on January 31 unless a renewal is  
submitted between December 1 and January 31, 1979

Lobbyist's Registration Number

## Instructions

- Print in ink or type.
- Complete form, have it notarized and return with \$10 registration fee to the Board of Ethics, 8401 United Plaza Blvd., Suite 200 Baton Rouge, LA 70809-7017, (225) 922-1400.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Renewals must be submitted between December 1 and January 31.

FOR OFFICE USE ONLY

Postmark Date: 1/21/79

1990842

1. NAME BURGIN R. JANE MI  
Last First

2. BUSINESS PHONE 504 893-6602  
Area Code and Phone Number

3. BUSINESS ADDRESS P.O. BOX 2482, COVINGTON, LA 70434  
Street and No. City State Zip

4. EMPLOYER BURGIN & ASSOCIATES

5. EMPLOYER'S ADDRESS P.O. BOX 2482, COVINGTON, LA 70434  
Street and No. City State Zip

6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name DELTA CHAPTER-SIERRA CLUB

Address 2123 ADAMS STREET, NEW ORLEANS, LA 70118

Business or purpose CONSERVATION

Does this person pay you? YES

If No, who pays you? \_\_\_\_\_

2. Name GIRL SCOUT COUNCILS OF LA.

Address 545 COLONIAL DRIVE, BATON ROUGE, LA 70806

Business or purpose YOUTH SERVICE ORGANIZATION

Does this person pay you? YES

If No, who pays you? \_\_\_\_\_

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3. Name COALITION TO RESTORE COASTAL LA.

Address 200 LAFAYETTE ST., STE 500, BATON ROUGE, LA 70808

Business or purpose COASTAL RESTORATION

Does this person pay you? YES

If No, who pays you? \_\_\_\_\_

4. Name \_\_\_\_\_

Address \_\_\_\_\_

Business or purpose \_\_\_\_\_

Does this person pay you? \_\_\_\_\_

If No, who pays you? \_\_\_\_\_

5. Name \_\_\_\_\_

Address \_\_\_\_\_

Business or purpose \_\_\_\_\_

Does this person pay you? \_\_\_\_\_

If No, who pays you? \_\_\_\_\_

State of LOUISIANA

Parish of ST. TAMMANY

Before me, the undersigned authority, personally came and appeared \_\_\_\_\_, who, after being duly sworn by me, did declare and acknowledge to me that the above statements are true and correct.

P. Jane Berger  
Signature of Lobbyist

Sworn to and subscribed before me on this 13<sup>th</sup> day of  
JANUARY, 1999.

Dale J. Tabor  
Notary Public

Rev. 8/97

ATTACH  
2" x 2"  
PHOTOGRAPH  
HERE  
FOR  
INITIAL  
REGISTRATION  
ONLY